

T27.2 : Se 9/1

ROLLINS COLLEGE LIBRARY
WINTER PARK, FLORIDA

The
STATUS OF SEX
EDUCATION IN
HIGH SCHOOLS



ISSUED BY
THE UNITED STATES PUBLIC HEALTH SERVICE
and THE UNITED STATES BUREAU OF EDUCATION
WASHINGTON, D. C.

ADDITIONAL PAMPHLETS.

The following publications of special interest to high-school teachers are available. They may be obtained free of charge upon request.

- V. D. B. No. 7. "The Problem of Sex Education in Schools." A pamphlet for teachers.
- V. D. B. No. 38. "The Need for Sex Education." A circular for teachers and parents. Contains a list of carefully selected books.
- V. D. B. No. 55. "Keeping Fit." A pamphlet for boys of high-school age.
- V. D. B. No. 60. "Healthy, Happy Womanhood." A pamphlet for girls of high-school age.
- V. D. B. No. 61. "Sex Education in the Home." A pamphlet for parents.

The Manual for High School Teachers which was in course of preparation for more than a year will be sent to high-school principals and teachers of biology, hygiene, domestic science, and other courses dealing with various aspects of health and hygiene. It will also be sent to English teachers. The supply is limited. Applications for the manual should therefore be submitted at once.

Address requests for publications to

THE UNITED STATES PUBLIC HEALTH SERVICE,
16 Seventh Street Southwest,
Washington, D. C.

Education Bulletin, 1921.

No. 52.

V. D. B. No. 69.

S. B. of H.
F

THE STATUS OF SEX EDUCATION IN HIGH SCHOOLS.¹

NEWELL W. EDSON, Assistant Director of Educational Work, United States Public Health Service.

Few school principals or teachers of extended experience fail to realize the need among their pupils for some sort of instruction and guidance in matters pertaining to sex. Undoubtedly this realization has led to the many spontaneous attempts to introduce sex instruction into our high schools.

Experiments along this line have sprung up all over the country, a few ineffective because undertaken by a teacher unsuited for the task, but most of them so successful as to win approval of both school officials and the public.

In January, 1920, the United States Bureau of Education and the United States Public Health Service sent out a questionnaire to obtain information regarding the status of sex instruction in the high schools of the United States. This questionnaire was sent to 12,025 accredited and partially accredited high schools and brought 6,488 (53.8 per cent) replies. Its purposes were threefold: (1) To ascertain facts about the number and distribution of high schools giving sex instruction through the regular subjects of the curriculum; (2) to learn of the content and method of the parts of such school subjects as relate to sex instruction and guidance; (3) to discover the attitude of principals toward sex instruction in high schools.

The schools from which replies were received fall naturally into three groups: (1) Those schools giving emergency sex education, i. e., through lectures, occasional talks, sex hygiene exhibits, pamphlets, etc.; (2) those schools giving integrated sex education, i. e., incidentally in the subjects of the regular curriculum; (3) those schools giving no sex education.

A summary of the returns indicates that there are 1,633 high schools of group 1, 1,005 of group 2, and 3,850 of group 3. Thus 2,638 high schools, or 40.6 per cent of those replying, are giving sex instruction of some sort. If the replies are representative, two-fifths of the A and B high schools of the country are attempting sex education. If, however, it be objected that most of the schools not re-

¹ Some of the material included in this bulletin was printed in *The School Review*, October, 1921.

plying were unable to give a favorable answer, the statement is justified that at least one-fifth of the high schools of the country are striving to meet this need. Probably the actual situation lies somewhere between these two estimates. These figures are surprisingly large when one considers that content and method for sex instruction have not yet approached anything like a standard form.

The returns from this questionnaire show that such instruction is not confined to one State or section; on the contrary, it has developed in every State, in cities and rural districts large and small, and in high schools of all sizes. The principal with a school of 15 pupils seems to have sensed and acted upon the need as keenly as the head of a large city high school for boys. The proportion of schools giving this instruction is somewhat larger in the West (Table I) than in other sections, although the actual number of high schools in the West is smaller than in either the Central States or the East.

While the ratio (Table II) of schools giving sex instruction to those who report as giving none is 11 to 16, there are many variations from this ratio and these are widely distributed. In Utah all schools reporting offer such instruction. In Delaware, Maryland, and New Hampshire relatively little attention is given to the problem. The large percentage in some States is possibly influenced by the fact that the subjects in connection with which such instruction is given are required by State syllabi, hence more widely taught in the schools. Where, for example, biology is compulsory in the freshman year, the figures for that State are probably larger than where no such course is required.

The schools of group 1 have been giving instruction largely through talks by speakers from outside the school—physicians, nurses, State health officers, Y. M. C. A. or Y. W. C. A. secretaries, social workers, ministers, superintendents, or board members. Sometimes the principal himself gives these talks, sometimes one or more teachers. In number they range from one a year to one a week, in the latter case approximating regular hygiene instruction. Usually the sexes are segregated. According to the institution, the number attending such lectures varies from a small group to the whole school. The exhibit for boys ("Keeping Fit"), developed by the United States Public Health Service and made available as a loan through the State boards of health has been shown in many hundred schools to many thousand pupils. This exhibit has won marked approval, and is in constant demand by high-school principals. The United States Public Health Service pamphlet for boys, " Keeping Fit," is frequently used as supplementary material after a lecture or the showing of the exhibit.²

² Since the questionnaire was sent out, a similar pamphlet for girls, " Healthy, Happy Womanhood," and a girls' exhibit, " Youth and Life," have been issued, and are being widely and successfully used.

Returns from the second group, those schools giving integrated sex education (through courses in the curriculum), indicate that the following subjects are used as vehicles for sex education: The biological sciences (general biology, botany, zoology, general science, agriculture, animal husbandry, and bacteriology), civics, the home-making courses (domestic science, home economics, household arts and home nursing), English, ethics, pedagogy, physical education, physiology and hygiene, psychology, and sociology. The biological sciences (for purposes of tabulation combined under one heading, because the instruction referring to sex is similar in all the courses having a biological content) provide over 50 per cent of the instruction. Next in order come physiology and hygiene with 23 per cent of the instruction, and the social sciences with 17 per cent.

It is quite evident that experiments have been tried in many fields, another strong indication that teachers realize the need for this work. Rather than create new courses bearing on sex matters, there has been a wholesome realization that it is unwise to emphasize sex as a separate factor to the extent of making it a full course, but that, on the other hand, sex instruction and guidance should be imparted in a way that makes a pupil accept it as a normal part of life. Casual references to sex matters rob sex of much of its disturbing mystery for adolescents and give it a right setting.

Analysis of the figures for schools giving integrated sex education shows (Table III) that it is given more frequently through biology, sociology, and hygiene. This is probably because the ordinary content of these subjects closely approaches the topics of this instruction and more easily admits of adaptation to include it. For example, biology can deal naturally with these sex topics among others: Reproduction in plants and animals, including human reproduction; environmental factors in development; pregnancy in mammals and evolution of care in infancy; internal secretions and their relation to adolescence; secondary sexual characters and their manifestations; elementary principles of heredity and eugenics. Sociology may refer to the relation of venereal diseases to society's defectives, the importance of the family in social evolution and the factors tending to its disruption, cooperation in the household, the influence upon sex relations of such factors as proper housing, wholesome recreation, hours and variety of occupation, etc. Hygiene may include the functions of cells and their conjugation, ductless glands and hormones, differences between bony and muscular systems of the two sexes, the reproductive system, bacteria and the venereal diseases, the relation of conservation of health to prenatal care, etc. The physical-education teacher, with regularly segregated groups, may make use of the excellent opportunity to talk frankly about the phenomena of menstruation, or, less frequently, of seminal emissions.

From Table IV it appears that the biological sciences lend themselves most readily and logically to consideration of the topic of human reproduction and that they, with the topics of sex instruction included in them, are given more frequently in the second year. There is a notably more even distribution over topics and years for physiology and hygiene, many schools teaching through these courses the four topics noted in the table. Sociology is used largely for the topic of venereal diseases, although few schools state the year in which the subject is taught. Probably the small number of schools dealing with the topics of menstruation and seminal emissions is due partly to lack of opportunity for segregation of sexes, but more to the difficulty which many teachers experience in approaching these important topics in a natural and impersonal way.

In a majority of schools this sex instruction is given in the first two years of the school course. But this incidence seems to be due to the fact that the media used for such instruction happen to fall in these years rather than to a deliberate selection of the subjects as vehicles for instruction especially needed in early adolescence. For example, biology, botany, zoology, and general science are usually freshman or sophomore subjects, while sociology is distinctly a junior or senior subject. Furthermore, physiology and hygiene and physical education are frequently taught in more than one year but show little deviation in figures for the different years.

Questions regarding method brought out the fact that three-fifths of the schools giving integrated sex instruction (592) use oral presentation by a regular teacher as one of their methods. One-third (326)³ make use of supplementary readings from pamphlets and books, the pupils being referred somewhat more frequently to pamphlets. One-quarter (244) give assistance to pupils through individual conferences, and an almost equal number (236) use the lecture method. That 241 schools have reached a point where general classroom discussions on these topics can be held, is a most helpful indication that the subject may be sanely and judiciously handled.

Tabulations not given here show that only 32.3 per cent of those schools which offer the biological sciences report that they utilize them as a means for integrated sex education. In the same way only 16 per cent of those offering physiology and hygiene and 5 per cent of those offering home-making subjects give sex instruction through them. Apparently a large majority of the teachers of these subjects fail to realize that their subjects can include this instruction, or they consciously exclude or avoid it.

Space was provided on the questionnaire for principals to indicate their attitude toward the introduction of sex instruction into the

³ Figures not exclusive, since one school may be giving sex instruction through more than one course.

curriculum. From Table V it is seen that a large percentage of principals favor integrated sex education, even among those in whose schools instruction is not given. In fact, these principals who favor but do not give integrated sex education represent 27.7 per cent of the whole number of A and B schools of the United States. On the part of those giving emergency sex education, the reason for this attitude may be that while the card exhibit ("Keeping Fit") published by the United States Public Health Service is conservative and normal in its approach to sex matters, lectures and special talks by local speakers may have emphasized the pathological and abnormal, or that the isolation of sex facts in a single lecture or two, with sexes separated for the occasion, too strongly emphasizes the matter of sex and consequently the taboo ordinarily put upon it. On the whole, therefore, emergency sex education has not won so many sponsors as has instruction spread over a period of time and given as a normal part of regular subjects.

There seems to be very general agreement among the principals as to the need of sex education. With few exceptions, differences of opinion are concerned with method to be used, rather than with need. The following replies are typical: "I regard it as being of fundamental importance." "The need is real and imminent." "Should be included in the curriculum of all high schools." "I think that the public ought to demand that it be included." "Need is great, as the ignorance of nature's laws exempts no human from paying the penalty in full." "I think the school that does not provide such instruction fails in its duty." "I deem it an essential in every respect. Too many youths know practically nothing along this line."

Many principals state that the home has failed in its duty and that few parents realize their obligations and opportunities in this direction. For example: "There is very emphatic need for such instruction, since the parents are so universally neglecting it." "These matters are usually left to home training, where natural reticence leads to neglect." An Ohio principal favors introducing such instruction into the schools "because of failure of parents to acquaint the child with the facts, and because of the ease with which these facts can be linked with other subjects." "The students are exceedingly ignorant; they don't get such training at home." "Such courses are of real importance, as many children have no other opportunity to obtain such instruction."

Four hundred principals, 79.5 per cent of those answering this question, state that the work has fully met their expectations. Most of the reasons for the lack of success (Table VI) are the same as for the unsucces in other teaching and can be eliminated by proper administration and further experience on the part of teachers. Occa-

sionally principals have overcome outside opposition by conferences through which parents were convinced of the need for, and the sound character of, the work. Some principals report success despite opposition. While the number of reports is too small to be used as a basis for generalization, the reasons assigned for lack of success are probably typical both in character and in proportion.

Throughout the great majority of these opinions runs the feeling that sex instruction is a most important task, yet a difficult one, for schools. Many principals deplore the lack of proper teachers for the work and feel that it should not be undertaken except by the right kind of instructor; in fact, several declare that without such a teacher the work does more harm than good. This attitude indicates wholesome caution. To give sex instruction requires mental maturity, a personality that is always respected, poise, sanity, sympathy with adolescent boys and girls, an accurate knowledge of facts and the ability to present them impersonally, unimpeachable character, and great tact. Few teachers have all these qualifications. Probably, however, there are some now not conducting this work who are well equipped to do so, but are holding back until suitable methods are better developed.

Occasionally a principal indicated on his questionnaire return that sex instruction can not be separated from guidance. However, there was a notable lack of comment, showing a realization that sex education should include not only the giving of information but also a conscious attempt to modify and control the school environment in matters which affect sex and social relationships. Sex education should not be restricted to a certain body of information given at a special time and place, but rather should it be spread over a considerable time and given in various relations. Since sex aspects are so closely connected with human conduct, sex education should be interwoven with character education and the creation of right attitudes and ideals.

CONCLUSIONS.

1. From the number of attempts in the field of sex education, experimental in character because of the absence of standard content or methods, and from the expressed attitude of high-school principals, there appears a rather widespread belief that sex education is needed.
2. Among the various States there is no uniformity in the ratio of schools giving sex education to those not giving it.
3. The West has apparently progressed somewhat further in developing sex education than have other sections of the country.
4. Not all school subjects are equally adapted to serve as media for sex facts. There are, however, some phases of sex education

which can be handled normally as part of a particular subject or of several subjects. Moreover, a wide variety of subjects may serve for presenting at least one phase of sex education.

5. The biological sciences, because of their frequent dealing with sex and reproduction in plants and animals, furnish the readiest vehicles for sex education. On the other hand, sociology, physiology and hygiene (which in its fact content is mainly biological), and physical education are possible avenues of approach, though few teachers are taking advantage of these opportunities.

6. Sex instruction is probably given early in the high-school course because the subjects including it happen to be taught then, rather than because of a conscious plan to give such instruction when it is most needed, in early adolescence.

7. There is marked approval of integrated sex education on the part of principals and a feeling that what instruction has been given has met with success.

8. Emergency sex education (i. e., special lectures, pamphlets, exhibits, etc.) has less approval than sex instruction given as a part of regular subjects in the curriculum.

9. There is apparently as yet no marked realization on the part of principals that sex education should include both instruction and guidance in matters pertaining to the relationships between the two sexes.

10. An exchange of experience among the different schools would undoubtedly allow many well-qualified teachers who are holding back now for lack of knowledge of method to go ahead with sex instruction and guidance.

Even though progress has been made in sex instruction in high schools and there are large numbers of principals favoring and undertaking it, it is well to continue to be cautious. Moreover, the figures herein given should not perhaps be interpreted too literally. The best of questionnaires are difficult of interpretation, and it is possible that some principals did not actually mean to imply that such definite instruction was being given as their answers would indicate. The Bureau of Education and the Public Health Service are therefore following up the replies to these questionnaires in order to secure more exact information and further details about methods used. In this way experience of schools succeeding in such pioneer and difficult work will be made available to others wishing to inaugurate new efforts in this direction and will furnish a sound basis for further developments in sex instruction.

TABLE I.—*Sectional distribution of high schools giving sex instruction.*

Geographic divisions.	Total A and B high schools.	Schools giving emergency or inte- grated sex education.	Percentage giving emergency or inte- grated sex education.
United States.....	12,025	2,638	21.9
New England States.....	698	108	15.4
Middle Atlantic States.....	1,214	374	30.8
South Atlantic States.....	1,302	186	14.2
East North Central States.....	3,342	771	23.6
West North Central States.....	2,528	553	21.8
East South Central States.....	706	93	13.1
West South Central States.....	1,108	138	12.4
Mountain States.....	484	124	25.6
Pacific States.....	643	243	37.7
No State given.....		48	.....

TABLE II.—*Distribution of replies by States and by kind of sex instruction given.*

	Total replies.	Emergency sex education.	Integrated sex education.	No sex education.	Total number of high schools.
Total for United States.....	6,488	1,633	1,005	3,850	12,025
Alabama.....	54	8	4	42	181
Arizona.....	20	7	5	8	29
Arkansas.....	59	22	11	26	147
California.....	167	48	79	40	248
Colorado.....	54	12	9	33	88
Connecticut.....	33	11	3	19	57
Delaware.....	15	0	3	12	33
District of Columbia.....	6	1	1	4	7
Florida.....	23	7	1	20	61
Georgia.....	55	15	8	32	176
Idaho.....	34	14	7	13	64
Illinois.....	366	99	60	207	678
Indiana.....	363	65	46	252	709
Iowa.....	390	132	44	214	804
Kansas.....	215	65	32	118	425
Kentucky.....	62	22	8	32	170
Louisiana.....	81	14	5	62	207
Maine.....	114	22	6	86	219
Maryland.....	49	6	3	40	92
Massachusetts.....	188	23	18	147	263
Michigan.....	293	92	36	165	598
Minnesota.....	143	37	23	83	229
Mississippi.....	55	23	5	27	165
Missouri.....	217	81	36	100	540
Montana.....	76	12	15	49	141
Nebraska.....	139	28	13	98	294
Nevada.....	13	4	1	8	23
New Hampshire.....	42	3	4	35	77
New Jersey.....	95	23	16	56	158
New Mexico.....	20	1	4	15	43
New York.....	466	72	72	322	758
North Carolina.....	169	37	15	117	486
North Dakota.....	83	29	11	43	142
Ohio.....	476	137	114	225	981
Oklahoma.....	50	9	13	28	179
Oregon.....	119	51	14	54	188
Pennsylvania.....	587	105	86	396	298
Rhode Island.....	16	2	3	11	23
South Carolina.....	40	8	3	29	143
South Dakota.....	46	17	5	24	94
Tennessee.....	71	14	9	48	190
Texas.....	173	37	27	109	575
Utah.....	21	4	17	0	47
Vermont.....	36	9	1	23	59
Virginia.....	65	20	3	42	137
Washington.....	120	27	24	69	207
West Virginia.....	88	29	26	33	167
Wisconsin.....	248	91	31	126	376
Wyoming.....	26	9	3	14	49
No State.....	142	29	19	91	.....

TABLE III.¹—Number of high schools giving integrated sex education in connection with certain subjects of instruction.

	Biology.	Sociology.	Physiology.	Hygiene.	Zoology.	General science.	Botany.	Other subjects.
Total for United States.....	432	202	158	147	78	72	59	193
Percentage for United States ²	32.2	15.0	11.8	11.0	5.8	5.4	4.4	14.4
Alabama.....	3					2		
Arizona.....	2	1	1	1	1	1		3
Arkansas.....	6		2	2		1	1	3
California.....	44	10	10	29	1	4	1	25
Colorado.....	6	4	1	1				1
Connecticut.....	3		1					
Delaware.....	1	1						1
District of Columbia.....			1					1
Florida.....	7		2		1		1	
Georgia.....	3	6					1	
Idaho.....	8	10	22	11	21	4	8	11
Illinois.....	4	5	12	5	2	12	12	11
Indiana.....	3	16	12	4	1	8	2	14
Iowa.....	3	8	13	9	1	2	1	12
Kansas.....	3	1	1				2	1
Kentucky.....	1	2	1					2
Louisiana.....	4					2		
Maine.....	2				1			1
Maryland.....	6	1	2	5		1	1	3
Massachusetts.....	7	3	12	10	5	3	1	1
Michigan.....	6	7	6	3	4	1	4	7
Minnesota.....	2						1	5
Mississippi.....	2	26	3	2			1	6
Missouri.....	7	4	1	1		2		4
Montana.....	1	1	5	3		2	2	3
Nevada.....				1				
New Hampshire.....			4					2
New Jersey.....	9	1	1	1	1			3
New Mexico.....	2	2		1	1	1		1
New York.....	60	2	2	9	1		2	5
North Carolina.....	8		1			5		3
North Dakota.....	1	5	6	1				3
Ohio.....	84	34	3	10	2	7		9
Oklahoma.....	9	4	3	2	2	1	1	6
Oregon.....	57	7	3	7	16	4	6	6
Pennsylvania.....	1		1				1	
Rhode Island.....	2							1
South Carolina.....		3	1	1			1	1
South Dakota.....	8	1		1	1			
Tennessee.....	13	5	7	3	2	1		3
Texas.....	8	9	2	4	1	1		1
Utah.....	1		2					2
Vermont.....								
Virginia.....					2			1
Washington.....	12	6		3	2		1	6
West Virginia.....	10	6	3	8	2			7
Wisconsin.....	8	6	5	4	4	3	2	7
Wyoming.....	1	2						1
No State.....	7	2	2		2	2	1	4

¹ An analysis of column 3 of Table II.² Percentages are not exclusive, since a school may offer more than one subject.



TABLE IV.—Number of schools teaching integrated sex education in connection with certain subjects of instruction.

	Human reproduction.					Venereal diseases.				
	First year. ¹	Second year.	Third year.	Fourth year.	Total. ²	First year. ¹	Second year.	Third year.	Fourth year.	Total. ²
Biological sciences.....	185	261	114	59	584	41	63	21	16	131
Physiology and hygiene.....	56	53	68	61	182	58	49	59	64	175
Sociology.....	1	.....	9	25	29	.....	14	12	11	154
Home-making subjects.....	14	12	9	6	29	1	3	7	1	15
Physical education.....	5	6	7	5	11	10	11	11	10	26
Other subjects.....	1	1	4	3	7	2	2	3	2	11

	Menstruation.					Seminal emissions.				
	First year. ¹	Second year.	Third year.	Fourth year.	Total.	First year.	Second year.	Third year.	Fourth year.	Total.
Biological sciences.....	7	11	4	5	22	6	14	5	3	23
Physiology and hygiene.....	43	40	42	49	109	23	19	20	19	59
Sociology.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Home-making subjects.....	13	13	11	8	26	.....	.....	.....	.....	.....
Physical education.....	12	10	11	10	23	6	6	5	5	15
Other subjects.....	1	1	1	1	1	.....	.....	.....	.....	.....

¹ Many schools did not indicate year.² Some schools offer subject more than one year.

TABLE V.—Attitude of principals toward introduction of sex instruction.

Attitude of principal.	Emergency sex education.		Integrated sex education.		No sex education.		Total.	
	Number.	Percent- age.	Number.	Percent- age.	Number.	Percent- age.	Number.	Percent- age.
Favorable.....	1,073	80.9	841	92.5	2,262	85.3	4,176	85.4
Undecided (doubtful).....	153	11.5	68	7.5	246	9.2	467	9.5
Opposed.....	101	7.6	.....	.....	143	5.5	244	5.1
Not indicated.....	401	.....	35	.....	1,165	.....	1,601	.....
Total.....	1,728	.....	944	.....	3,816	.....	6,488	.....

TABLE VI.—Reasons for lack of success.

From within the school:

Teachers not trained.....	21
Teachers of wrong personality or attitude.....	19
Teachers too few.....	6
Teacher opposition or lack of cooperation.....	6
Segregation of sexes difficult.....	15
Complexity of groups.....	1
Reaches too few.....	1
Material lacking.....	11
Instruction not properly organized.....	21
Instruction too irregular.....	8
Instruction overemphasized sex.....	4
Given no fair trial.....	8

From outside the school:

Parent opposition, disapproval, or indifference.....	29
Parents prefer home instruction.....	2
Public opposition or indifference.....	35
Board opposition.....	1

